Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

B-5266 621370-1

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			5					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	5 minus 20=		*			X\$ 9=		OR	X\$18=		
IN	DEPENDENT C	LAIMS	2 minus 3 =		*			X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESE				ESENT				+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0						column 2		TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II								OTHER THAN					
		(Column 1)	(Colum) (Column 3)		SMALLE		OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER SUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	01.411.4	=		X43=		OR	X86=		
	FIRST PRESE	ENTATION OF MU	JUIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=		
								TOTAL DDIT. FEE		OR	TOTAL		
	(Column 1) (Column 2) (Column 3)									1011	ADDIT. FEE		
		CLAIMS		HIGHE		(Column 3)	ı		ADDI			- 1 - 1 - 1	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	LIIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=		
								TOTAL DDIT. FEE		OR ,	TOTAL		
(Calumn 4)										, ,	ADDIT. FEE		
7	`	(Column 1) CLAIMS		(Colum		(Column 3)	_			F			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIOI PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	1	
	Independent	*	Minus	***		=	-	X43=			X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A43=		OR	X00=		
* If	the entry in colum	nn 1 is less than the	entry in colur	nn 2 weito "	O" in ook	2	L	+145= TOTAL	·	OR	+290=		
** 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
I	he "Highest Num	nber Previously Paid ber Previously Paid	For" (Total or	SPACE is Independer	iess thar it) is the	1 3, enter "3." highest number		DIT. FEE L	opriate box				